



Home Occupation License Application

Today's Date:

MM/DD/YY

/ /

Time:

Licensing Fees

Make checks payable to: Town of Erie

Home Occupation, Household & Personal Accessory Items - Sales \$25.00

PLEASE TYPE OR PRINT CLEARLY and COMPLETE **BOTH** SIDES OF APPLICATION

Business Contact Information

Applicant/Owner Name:	First	Last	Title
Business Name/DBA/Trade Name:	Business Name		DBA/Trade Name
Physical Address of Business:			
City:	State:	Zip:	
Mailing Address of Business:			
City:	State:	Zip:	
Corporate Address (if applicable):			
City:	State:	Zip:	
Business Phone No.:	Fax No.:	Emergency No.:	
Email:	Website:		

Business Information

Type of Ownership (check one):	Sole Proprietor: _____	Partnership: _____	LLC: _____	Corporation: _____	Other: _____
NAIC Code:	Visit www.census.gov/eos/naics/ and enter keyword describing business for code		Tax ID #:	EIN or Social Security Number	
Type of Business:	Retail: _____	Wholesale: _____	Manufacturing: _____	Service: _____	Other: _____
Description of Business:					
Date Intend to Open Business:					
Will there be any building alterations or fixed equipment, or paving be installed? No _____					
If Yes, please describe:					
Itemized Use of Space (square feet):					
Total square footage of home (include basement and attached garage): _____ Square feet of space for business: _____					
Square feet of space for business in a detached structure: _____					
No. of Full-Time Employees: _____ No. of Part-Time Employees: _____					
Day Care Business: _____ Max. No. of Children on Site: _____ State License No.: _____					

Tenant Occupied Homes - Please Complete

Physical Address Building Owner Name:
Building Owner Mailing Address:
Emergency Contact Name/Phone No.:

Home Occupation Regulations - Acknowledgement of Review

Home occupations may be allowed as a permitted accessory use governed by the following regulations:

1. A home occupation shall not be conducted until a home occupation has been approved by the Community Development Director and a license has been issued by the Director. Said license shall cite the conditions of the approval, if any.
2. Home occupations must be clearly secondary to the use of the building as a residence and shall not occupy more than 25 percent of the total floor area of the main building; or if located in an accessory building(s), shall not occupy more than 500 square feet except by Special Review Use.
3. The home occupation shall use the same water, electric and gas meters as the residence.
4. Home occupations shall be operated entirely from an enclosed structure with no exterior storage of business related vehicles, materials, or equipment. The home occupation owner's individual business/personal passenger vehicle is exempt from this requirement.
5. There shall be no visible evidence of the operation, and it shall not change the residential character thereof.
6. There shall be no signage identifying the home occupation.
7. The residential building includes complete residential facilities, i.e. kitchen, living room, bathroom and bedroom(s).
8. Only persons residing in the residence can operate the home occupation at the residence. A maximum of two off-site employees or independent contractors of the business may come to the residence at the same time for work assignments, supplies, etc.
9. The operation shall not generate objectionable traffic in the area, and off-street parking must be provided to accommodate all needs created by the home occupation; however, in no case shall the number of additional parking spaces provided for the home occupation exceed the number of bedrooms in the residence.
10. The operation shall not be objectionable due to odor, dust, smoke, noise, vibration or other similar impacts.
11. The following uses, because of their tendency to go beyond the limits permitted for home occupations and thereby impair the use and value of the residential area shall not be permitted as home occupations: auto repair or motorized implement repair; dance, music or other types of instruction (if more than four students are being instructed at one time); dental offices; medical offices; the painting of vehicles, trailers, boats; private schools with organized classes; motor vehicle towing operation; barber shops having more than one chair; beauty shops having more than one chair; welding shops; nursing homes; bed and breakfast and other such transient lodging; and retail sales where products are stocked and sold to purchasers at the home occupation residence like a retail store.

I hereby certify and state, under penalty of perjury, that I am the applicant in the foregoing application, herein stated information is correct to the best of my knowledge and belief. I further acknowledge that I have reviewed the above stated regulations related to the operation of a home occupation, and agree to abide by the Town of Erie Municipal Code.

Print Name: _____

Title: _____

Signature: _____

Date: _____

☐ Check box if you would like to receive periodic Economic Development Information from the Town of Erie.

☐ Check box if you would like to receive periodic business assistance information.

What type of business assistance information is important to you (check all that apply):

Marketing ☐ Networking ☐ Financing ☐ Staffing ☐ Business Planning ☐ Emergency Preparedness ☐

Staff Use Only:

Zoning Designation: _____ Use Allowed (circle): Yes No Special Use Review Req. Yes No

Fee Amount Paid: \$ _____ Cash: _____ Check No.: _____ Credit Card: _____

Reviewed By: _____ License No. Issued: _____ Parcel No.: _____

C.O. Issuing Staff: _____ Date Inspected: _____ Parcel Owner: _____

Comments: _____